Make, Model, Description of Equipment:		Facility:			Month and Year:		Page No.
Physical Location of Equipment:		REPRODUCTION REGISTER					
Day	Reproduced Material Description	No Pages	No Copies	Total Copies	User Name/Office	F	Remarks
	Total this page	X =			Total Impressions for Month		

NDWg Form 10-3

19 Jan 01

Local Reproduction Authorized

OPR; DA